



DS-2019 Requests

Workflow
Processing
Payment

Presented by
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UNIVERSITY of HOUSTON

OFFICE OF THE PROVOST
International Student and Scholar Services

An Overview of Our Workflow

- DS-2019 request is initiated by UH department.
- ISSS receives and reviews the documents for processing.
- If all required documents are received, ISSS creates a record for the exchange visitor, generates DS-2019 form and information packet for the scholar and dependents.
- If items are missing ISSS works with the department to complete the process.

Processing the request... what is needed?

Research Scholar/Short Term Scholar/Professor	Student Intern
<ul style="list-style-type: none"> <input type="checkbox"/> Completed and signed DS-2019 Request Form <input type="checkbox"/> Passport biographic page for scholar and any dependents <input type="checkbox"/> Documentation of English proficiency requirement <input type="checkbox"/> HR Approval Signature (UH Staff) <input type="checkbox"/> Official documentation of financial support in English and in U.S. dollar amounts (scholar-\$1220 per month/each dependent - \$5075 per year) <input type="checkbox"/> Verify program dates <input type="checkbox"/> Payment of \$80 or \$50 (if program is less than one semester) 	<ul style="list-style-type: none"> <input type="checkbox"/> Completed and signed Student Intern DS-2019 Request Form <input type="checkbox"/> Completed form DS-7002 <input type="checkbox"/> Passport biographic page for scholar and any dependents <input type="checkbox"/> Documentation of English proficiency requirement <input type="checkbox"/> Official documentation of financial support in English and in U.S. dollar amounts (scholar-\$1220 per month/each dependent - \$5075 per year) <input type="checkbox"/> Verify program dates <input type="checkbox"/> Payment of \$160

Form DS-2019

Part 1: Personal Information-Complete sections 1-10

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DS-2019 REQUEST FORM

Part I.

Personal Information (Attach a copy of passport biographic page)

1. Family name (Last Name) Davis	Given name (First Name) Juanette	2. Sex <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	3. Date of Birth(mm/dd/yy) 7/1/92
4. City of Birth Paris	5. Country of Birth France	6(a) Country of Citizenship: France	(b)Country of legal Permanent Residence: France
7. U.S. address if known: (including zip code) 4800 Calhoun Road, Houston, TX 77204	Foreign address: 123 La Rue Faux, 75008 Paris, FRANCE	Phone number: +1(555)555-5555	Email: jldavis@uh.edu
8. Specify visitor's present Position in home-country: Type of Position must be chosen: <input type="checkbox"/> Government <input type="checkbox"/> Private Sector <input checked="" type="checkbox"/> Academic <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student	9. Is the visitor in the U.S. now? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, give: Current visa type: _____ If J, complete information below: J Category: _____ Current location: _____ Submit current DS-2019.	10. Has he/she been in the U.S. before? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, give: Previous visa type(s): _____ If J, complete information below: J Category: _____ Previous location(s): _____ Previous DS-2019 dates: _____ Submit previous DS-2019s.	

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Part 2: Dependent Information- Provide information for each dependent that will join the exchange visitor during the program.

Part II.

Dependent(s) Information (Please complete if dependents will come on J-2 visa(s) and attach a copy of passport biographic page for each one)

	Dependent 1	Dependent 2	Dependent 3
Full name(Family name, Given name):	Denzel Davis		
Relationship to J-1	Spouse		
Birth Date (mm/dd/yy)	3/6/1980		
Birth City	Paris		
Birth Country	France		
Citizenship	France		
Country of legal permanent residence	France		
Email address if age is 18 or older	ddavis@xyz.com		

*Please use additional page if needed for more dependents

- Please provide an email address for each dependent over the age of 18.
- Please provide a passport biographic page for each dependent.

Form DS-2019

Part 3: English Proficiency Requirement

Part 4: Program Information

Part III. (Skip to part IV if this request is for a DS-2019 program extension or transfer a J-1 from another U.S. institution)

English Proficiency

English Proficiency is required by federal law. Does the prospective J-1 exchange visitor have sufficient English language skills to function on a day-to-day basis? Yes No

UH departments should provide ISSS with documentation using one of the following measurements:

- A recognized English Language test (attach a score report); OR
- Signed documentation from an academic institution of English language school (attach a copy of the grade document).OR
- Conducted in-person interview on _____ (date) by _____ (faculty/staff name) or by videoconferencing on _____ (date) by _____ (faculty/staff name).

The listed above measurements are exempt if the J-1 exchange visitor has obtained a secondary school degree or higher from a country where English is spoken as the native language:

Country: _____ Degree: _____

Part IV.

Program Information

11. Indicate program dates to be covered by the form DS-2019:

From _____ To _____

(Visa process may take minimum 4-6 weeks, please consider a feasible start day)

Professors/Research Scholars/Specialists must be done on a one year or less basis. The period of stay should NOT exceed a total of 5 years for Professors and Research Scholars.

Allow time for processing

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Form DS-2019

Selecting the Appropriate Category

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12. Choose the most appropriate category for the exchange visitor:

- Student (NDO Student: Please contact Jin Zhang at extension 3-5072)
- Short-term Scholar [maximum duration is 6 months and cannot be used as a “way around” repeating bar(s)]
- Professor (will be barred for 24 months on repeat participation)
- Research Scholar (will be barred for 24 months on repeat participation)

All categories except student: Please submit \$80.00 annual fee via SCVoucher or check payable to U.H. The fee is \$50 for one semester or less.

NOTE: Only J-1 Exchange Visitors in the STUDENT category may participate in full-time studies and pursue a degree.

13. Brief description of primary educational activity and duties in which the Exchange Visitor will be engaged:

Please provide a brief description of the primary educational activities and duties of the Exchange Visitor in this space.

Will the activity involve direct patient care? Yes No

(UH sponsored J-1's cannot participate in any clinical activities involving direct patient care.)

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Form DS-2019

Documentation of Financial Support-

14. Will UH have financial obligation to the visitor for the period listed in item #11:

NO -> Skip to #15 YES -> Continue to #14(a).

(a) Salary per month (\$): \$4,200 + Non-Salary (e.g. fellowship, scholarship, etc.): _____
=ANNUAL TOTAL: \$50,400

If UH provides a salary, answer b-f. If no salary provided, skip to #15.

(b) Salary appointment per year is:

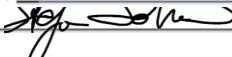
9 months 12 months Other _____

(c) Faculty Staff (Requires HR Approval)

(d) Job Code T3D4 Job Title Researcher, 4 Posting Number STA008011

(e) Is the visitor a current UH employee? Yes No

If Yes, provide Employee ID: _____

(f) HR Approval Signature  Name: _____ Name of HR Staff

15. Financial support from the prospective J-1 personal/organization OTHER THAN U.H. Please specify name, amount of support, supporting documents via official letter.

Name: _____ Dollar amount total (\$): _____

DOCUMENTS MUST BE IN ENGLISH AND SUPPORT AMOUNT IN U.S. DOLLARS:

The category of support is: Government Private

NOTE: STUDENTS MAY NOT BE SUBSTANTIALLY FUNDED FROM PERSONAL OR FAMILY FUNDS

- Scholar must show documentation of minimum \$1220 per month.
- Scholar must show documentation of minimum \$5075 per each dependent.
- Personal funds must be in the scholar's own name.
- Bank statements should not display full account number.

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Form DS-2019

Medical Insurance Requirements

16. The U.S. State Department requires ALL J-1 and J-2 visa holders to have medical insurance. Medical insurance usually does not cover pre-existing conditions such as pregnancy, illness, or other pre-existing conditions. Most policies require dependents to be covered upon arrival, or within 30 days of arrival in the U.S. The J-1 should make arrangements for continual coverage in the U.S. that meets the U.S. Code of Federal Regulations minimum requirements. Therefore, please complete the following:

HEALTH INSURANCE for individuals listed in Part I and Part II of this form will be provided by:

Employee Benefits Eligible Plan from the University of Houston

Another organization or by the individual listed in Part I

NOTE: Failure of an exchange visitor and accompanying dependents to maintain health insurance may lead to the termination of the exchange visitor's program.

Form DS-2019

Departmental Contact and Checklist

17.

College/Department Name: International Student and Scholar Services	Address: 4465 University Drive	Mail Code: 3024
Contact Person when the request is ready, Name: Jackeice Chambers	Phone number: 713-743-5023	Email: jcchambers@central.uh.edu
Name of Supervisor For the J-1: Anita Gaines	Phone number: 713-743-5065	Email: issso1@uh.edu

18. The section below to be completed by the authorized person at the University of Houston:

I understand that the department must promptly (on or before the next business day) notify the International Student and Scholar Service (ISSS) of any investigations of an exchange visitor's site of activity or any serious problem or controversy that could be expected to bring the Department Of State, the Exchange Visitor Program or the Sponsor's exchange visitor program into notoriety or disrepute, to include: [22 CFR 62.13(d)]

- Potential litigation related to sponsor's exchange visitor program, in which the exchange visitor may be named party
- Death or missing of an exchange visitor
- Serious injury or illness of an exchange visitor
- Sexual abuse allegations
- Other Situations impacting Exchange Visitor safety

Also, I will notify ISSS if of any changes regarding the Exchange Visitor's program, including (but not limited), program dates, site of the activity, funding and etc.

Exchange Visitors may be in a tenure track position at U.H. as long as s/he is not a candidate for tenure. The Exchange Visitor named in is not a candidate for tenure. I certify that the information on this form is correct to the best of the department's knowledge:

Name of Dean or Chairman: Stefan Johnsson

Signature of Dean or Chairman:  Date: 3/21/2019

CHECKLIST (Before submitting this request, be sure you have all required documents):

- Completed and signed DS - 2019 Request Form
- Passport biographic page for scholar and any dependents
- Documentation of English Proficiency Requirement
 - Certificate or
 - Test scores or
 - Documented in person or video conferencing interview
- HR Approval Signature (UH Staff) or
- Official documentation of financial support in English and in U.S. dollar amounts (scholar-\$1220 per month and each dependent - \$5075 per year)
- Verify program dates
- Payment of \$80 or \$50 (if program is less than one semester)

Important Note: U.S. Department state does not allow for a copy of DS-2019 Form to be sent through any electronic means.

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Form DS-2019

Exchange Visitor Certification

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EXCHANGE VISITOR CERTIFICATION (For program extension only)

I understand that as a J-1/J-2 visa holder, I am required to maintain health insurance with minimum coverage as specified in the "Statement of Understanding regarding the Health Insurance requirement for the J-1 Exchange Visitor Program" for myself and accompanying dependents. I hereby affirm that I have the stated insurance for the effective period of all valid Form(s) DS-2019 issued to me.

Exchange visitors subject to the two-year home residency requirement who have been granted a waiver of this requirement are ineligible to extend J-1 status. In order that we may determine eligibility of extending your DS-2019, it is mandatory for you to certify if you have or have not applied for a waiver by answering the question below:

HAVE YOU APPLIED FOR A WAIVER OF THE TWO-YEAR HOME RESIDENCY REQUIREMENT?

Yes No

If yes, please provide your Department of State Case Number: _____

I hereby certify that I have read and understand the information regarding the insurance requirement as set forth by the U.S. Department of State. I understand the two-year home residency requirement. The information given by me on this application to extend J-1 status is true and correct to the best of my knowledge.

Signature of Exchange Visitor (Required) _____

Date: 02/17/2017

University departments can submit completed DS-2019 requests through SC Voucher to:

Vendor ID: 000000032

730-UH International Student Services

Please upload the completed DS-2019 request form and all supporting documentation into PeopleSoft Finance and submit into workflow for processing.

Non-departmental requests can be forwarded to:

International Student and Scholar Services

University Center North Room 203 (campus mail code: 3024)

Please allow 5 business days processing time for all requests. ISSS will call your office when the documents are ready for pickup. For questions, please call Anita Gaines at (713)743-5065.

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Payment Options

Paying by check:

Send DS-2019 request and supporting documents to ISSS.
Make check payable to the University of Houston

International Student and Scholar Services
4465 University Drive, Room 203
Houston, TX 77204-3024

Payment through SC Voucher

Vendor ID: 0000000032

730-UH International Student Services

Speedtype: 53043

Back up documentation should include:

- Completed DS-2019 request form
- DS-7002 if EV is coming as Student Intern
- Copy of passport biographic page for EV and each dependent
- Documentation of English proficiency requirement
- Documentation of financial support
- Copies of any current or previous DS-2019's

Timeline

Please allow **5** business days processing time.

- Processing time begins once all required documents are received by our office.

Department \implies Department Business Administrator \implies ISSS \implies Accounts Payable

Department Resources

International Student and Scholar Services

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Inviting J-Visa Research and Professors

-  [UH Faculty and Staff Guide to J-1 Program](#)
-  [How to Select Category for Prospective J-1](#)
-  [Process Outline](#)
- [Sample Invitation Letter](#)
- [Download DS-2019 Request Form](#)

[Window Snip](#)

Office Contacts

Jackeice Chambers: Form inquiries	3-5065	jcchambe@central.uh.edu
Emily Estill: Form inquiries	3-5065	eestill@uh.edu
Jin Zhang: J-1 Specialist	3-5072	jinzhang@uh.edu
Juanette Davis: Financial Inquiries	3-5069	jldavis1@uh.edu
Anita Gaines: Director	3-5065	againes@uh.edu

Questions???

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